

STATE OF IOWA

CHESTER J. CULVER, GOVERNOR PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

INFORMATIONAL LETTER NO. 614

DATE: May 24, 2007

TO: Service Workers and Supervisors

Case Managers and Supervisors

Jim Krogman, Field Operations Support

HCBS Specialists

Child Health Specialty Clinics

Diane Diamond, DHS Case Management

Deb Westvold, ISAC

Judy Alexander, SE Case Management

FROM: Iowa Medicaid Enterprise, Program Managers

SUBJECT: Home and Community Based Services (HCBS) Waiver Respite

Home and Community Based Services are designed to provide supports for the individual to remain in their own home and community. In the HCBS programs, all of the services are provided to meet the needs of the Medicaid individual, with one exception. Respite services are provided to the consumer that would give temporary relief to the usual caregiver and provide all the necessary care that the usual caregiver would provide during that time. Respite care is not to be provided to persons during the hours in which the usual caregiver is employed except when the consumer is in camp. This exception was allowed as camps are typically provided on a weekly basis either during the day or overnight. Some camps are provided over the weekends. Camp settings were expanded under respite to provide an opportunity for individuals to have the camp experience.

While over 21,000 people receive HCBS in their home and/or community, there are still many unmet needs. One of the identified unmet needs has been daycare for children with disabilities, especially during the summer months. Under Medicaid, the Federal government does not cover the cost of day care, including the HCBS waivers. The Centers for Medicare and Medicaid Services (CMS) has made the following statement:

As with all Medicaid services, there must be a "medical necessity" for a service and Medicaid must be the payer of last resort. The service must be tied specifically to the child's needs, not enabling a family member to go to work, and must be reflective of an actual Medical need, not just supervision.

Camp experiences for children in general usually do not extend beyond three weeks (one week per month) during the summer. Day camp attendance by the child beyond this amount would likely be seen by CMS as solely for the purpose of enabling a family member to go to work.

There are other ways to provide for the child's needs during the summer. One is accessing extended year services through the school districts and the Area Education Associations (AEA) for the child's special needs that continue through the summer. The parents can apply for day care subsidy through their local Department of Human Services office if there is financial hardship prohibiting them from paying the additional costs of summer care. Many camp programs have camp ships available to assist with the cost of the camp experience. The Respite and Crisis Care Coalition periodically has funding available to assist families with respite services. Currently this funding is depleted, but this agency does receive funding intermittently, so families should continue to check with them.

There are restrictions on what services can be paid for under HCBS waivers due to federal regulations. Funding for the HCBS waivers is dependent upon federal financial participation, which pays approximately two-thirds of the cost. If the Department does not follow the federal regulations, the state could lose this federal funding. While the Department acknowledges the concerns parents have regarding summer childcare for children with special care needs, there are limits to the amount of coverage available under Medicaid HCBS waivers. The department encourages parents to look to the alternatives such as those mentioned above.

Please note that day care also cannot be reimbursed under the HCBS waiver consumer choices option.

Follow Up Questions: Follow up questions should be processed through service worker/case manager supervisors, who may contact the waiver program managers.